

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT

ADDRESS (number and street)

123 S FRONT ST

☐ Check if different than previously reported. (ACC)

MEMPHIS

TN

38103

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00233056

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☒ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
01 01 2015

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Raymond Albert Pohlman

Signature of Treasurer

Raymond Albert Pohlman

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 17 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

## AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
01 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2015</span>		<span style="border: 1px solid black; padding: 2px;">87637.74</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">87637.74</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">34428.96</span>	<span style="border: 1px solid black; padding: 2px;">34428.96</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">122066.70</span>	<span style="border: 1px solid black; padding: 2px;">122066.70</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">35850.00</span>	<span style="border: 1px solid black; padding: 2px;">35850.00</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">86216.70</span>	<span style="border: 1px solid black; padding: 2px;">86216.70</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

## of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

### AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 01 / 01 / 2015

To:

 M M / D D / Y Y Y Y Y  
 06 / 30 / 2015
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

23721.00

23721.00

(ii) Unitemized .....

10707.96

10707.96

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

34428.96

34428.96

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

34428.96

34428.96

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3) .....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

34428.96

34428.96

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

34428.96

34428.96

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	100.00	100.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	100.00	100.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	18000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	17750.00	17750.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	35850.00	35850.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35850.00	35850.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	34428.96	34428.96
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	34428.96	34428.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	100.00	100.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	100.00	100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 25

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Dalton L Bennett**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

Construction Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6076

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

**B. Benson Blackwell**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Stores

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6077

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

**C. Brian L Campbell**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP, Tax, Treasury & Investor Relations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6081

Amount of Each Receipt this Period

520.00

40/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1040.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. David Cook**

Mailing Address 123 S Front St

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Director Supply Chain Decision Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6084

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

**B. Philip Bernard Daniele III**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Merchandising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

585.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6085

Amount of Each Receipt this Period

585.00

45/biweekly

Full Name (Last, First, Middle Initial)

**C. Anthony Dudek**

Mailing Address 123 S Front Street

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP of IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6087

Amount of Each Receipt this Period

520.00

40/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1365.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 8 OF 25  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Robert A Durkin**

Mailing Address 123 S. Front St.

City State Zip Code  
 Memphis TN 38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Stores

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6088

Amount of Each Receipt this Period

520.00

40/biweekly

Full Name (Last, First, Middle Initial)

**B. Bill R Edwards**

Mailing Address 123 S. Front St.

City State Zip Code  
 Memphis TN 38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Merchandising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6089

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

**C. Mark Alan Finestone**

Mailing Address 123 S. Front St.

City State Zip Code  
 Memphis TN 38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

SVP of Merchandising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6092

Amount of Each Receipt this Period

1300.00

100/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2080.00



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

## **A. Preston Frazer**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone

Occupation

VP Internal Audit

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6093

Amount of Each Receipt this Period

520.00

40/biweekly

Full Name (Last, First, Middle Initial)

## **B. Douglas L Gage**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

Safety & DC LC Services Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6094

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

## **C. Mr. William T Giles**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

Chief Financial Officer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

01 / 20 / 2015

Transaction ID : SA11AI.6070

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3280.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 10 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

## **A. Patricia Glancy**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Ops Comm &amp; Customer Exp Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6095

Amount of Each Receipt this Period

325.00

25/biweekly

Full Name (Last, First, Middle Initial)

## **B. Harry Louis Goldsmith**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

EVP of General Counsel &amp; Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
01 / 09 / 2015

Transaction ID : SA11AI.6069

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Eric Samuel Gould**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Commercial Support

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6097

Amount of Each Receipt this Period

260.00

20/biweekly

SUBTOTAL of Receipts This Page (optional)..... ►

1085.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. William W Graves**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

SVP of Supply Chain

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6098

Amount of Each Receipt this Period

1300.00

100/biweekly

Full Name (Last, First, Middle Initial)

**B. Ronald Blair Griffin**

Mailing Address 123 S Front Street

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

SVP/CIO

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6099

Amount of Each Receipt this Period

1200.00

92.31/biweekly

Full Name (Last, First, Middle Initial)

**C. James C Griffith**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Development

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6100

Amount of Each Receipt this Period

650.00

50/biweekly

SUBTOTAL of Receipts This Page (optional)..... ►

3150.00

TOTAL This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. William Hackney**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Merch Pricing & Analysis VP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6101

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

**B. Rod Halsell**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Distribution VP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6102

Amount of Each Receipt this Period

520.00

40/biweekly

Full Name (Last, First, Middle Initial)

**C. Mark Jimenez**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP of Store Operations - Mexico

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6109

Amount of Each Receipt this Period

260.00

20/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1040.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Kenneth Klein**

Mailing Address PO Box 2198

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP Merchandising

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6111

Amount of Each Receipt this Period

440.00

33.85/biweekly

Full Name (Last, First, Middle Initial)

**B. Thomas Kliman**

Mailing Address PO Box 2198

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP Tax

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6113

Amount of Each Receipt this Period

275.00

21.15/biweekly

Full Name (Last, First, Middle Initial)

**C. Steven McClanahan**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Store Maintenance/Set-Up Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6117

Amount of Each Receipt this Period

260.00

20/biweekly

SUBTOTAL of Receipts This Page (optional)..... ►

975.00

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 14 OF 25

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Grantland E McGee Jr.**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Stores

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.6118

Amount of Each Receipt this Period

520.00

40/biweekly

Full Name (Last, First, Middle Initial)

**B. J. Scott Murphy**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Strategic Planning &amp; Bus Dev VP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.6122

Amount of Each Receipt this Period

520.00

40/biweekly

Full Name (Last, First, Middle Initial)

**C. Jeff Nix**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

IT VP

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.6123

Amount of Each Receipt this Period

520.00

40/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1560.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 25

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Jason Overturf**

Mailing Address PO Box 2198

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

Regional Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	5		

Transaction ID : SA11AI.6124

Amount of Each Receipt this Period

240.00

18.46/biweekly

Full Name (Last, First, Middle Initial)

**B. Raymond Albert Pohlman**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Govt. and Community Relations

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	5		

Transaction ID : SA11AI.6126

Amount of Each Receipt this Period

650.00

50/biweekly

Full Name (Last, First, Middle Initial)

**C. Elizabeth S Rabun**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Loss Prevention

Receipt For:

☐ Primary  
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		3	0		2	0	1	5		

Transaction ID : SA11AI.6128

Amount of Each Receipt this Period

1100.00

84.62/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1990.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 16 OF 25

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. William C Rhodes**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

Chairman, President & CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2496.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6129

Amount of Each Receipt this Period

2496.00

192/biweekly

Full Name (Last, First, Middle Initial)

**B. Jamey Rutherford**

Mailing Address PO Box 2198

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP E-Commerce

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6131

Amount of Each Receipt this Period

440.00

33.85/biweekly

Full Name (Last, First, Middle Initial)

**C. Albert Sattiel**

Mailing Address PO Box 2198

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

SVP Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

06 / 30 / 2015

Transaction ID : SA11AI.6133

Amount of Each Receipt this Period

440.00

33.85/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3376.00



**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 25

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Samuel R Sandoval**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

Regional Manager

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.6135

Amount of Each Receipt this Period

260.00

20/biweekly

Full Name (Last, First, Middle Initial)

**B. Joe L Sellers Jr.**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone Inc.

Occupation

VP of Stores

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.6139

Amount of Each Receipt this Period

520.00

40/biweekly

Full Name (Last, First, Middle Initial)

**C. Brett Shanaman**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP of Marketing

Receipt For:

☐ Primary  
☐ Other (specify) ▼
☐ General

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Transaction ID : SA11AI.6140

Amount of Each Receipt this Period

520.00

40/biweekly

**SUBTOTAL** of Receipts This Page (optional)..... ►

1300.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 OF 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Doug Wines**

Mailing Address PO Box 2198

City

Memphis

State

TN

Zip Code

38101

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

VP IT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6146

Amount of Each Receipt this Period

440.00

33.85/biweekly

Full Name (Last, First, Middle Initial)

**B. Kristen Wright**

Mailing Address 123 S. Front St.

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AutoZone, Inc.

Occupation

SVP/General Counsel &amp; Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2015

Transaction ID : SA11AI.6149

Amount of Each Receipt this Period

1040.00

80/biweekly

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1480.00

23721.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. BOB GOODLATTE FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2015

Mailing Address P.O. Box 3591

City	State	Zip Code
Alexandria	VA	22302

**Transaction ID : SB23.6041**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Mr. Bob Goodlatte**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: VA District: 06

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. COHEN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2015

Mailing Address 228 2ND ST, SE

City	State	Zip Code
WASHINGTON	DC	20003

**Transaction ID : SB23.6039**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Mr. STEPHEN IRA COHEN**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: TN District: 09

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. Issa for Congress**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		23		2015

Mailing Address PO Box 368

City	State	Zip Code
Falls Church	VA	22040

**Transaction ID : SB23.6042**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**DARRELL ISSA**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: CA District: 49

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3500.00
---------

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 20 OF 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. MA Democratic Party Federal PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		06		2015

Mailing Address 77 Summer Street

City	State	Zip Code
Boston	MA	02110

**Transaction ID : SB23.6054**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**MA Democratic Party Federal PAC**Category/  
Type

2500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Republican State Leadership Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		04		2015

Mailing Address 1201 F Street, NW  
Suite 675

City	State	Zip Code
Washington	DC	20004

**Transaction ID : SB23.6036**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**Republican State Leadership Committee**Category/  
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Rob Portman for US Senate**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		28		2015

Mailing Address 900 19th Street, NW  
8th Floor

City	State	Zip Code
Washington	DC	20006

**Transaction ID : SB23.6051**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

Candidate Name

**ROB PORTMAN**Category/  
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: OH District: 00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 21 OF 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Steve Fincher for Congress**

Mailing Address PO Box 11153

City	State	Zip Code
Jackson	TN	38308

Purpose of Disbursement  
Contribution

011

Candidate Name

**Steve Fincher**Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: TN District: 08

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2015

**Transaction ID : SB23.6050**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Tennessee Republican Party**

Mailing Address 2424 21st Ave

City	State	Zip Code
Nashville	TN	37212

Purpose of Disbursement  
Contribution

011

Candidate Name

**Tennessee Republican Party**Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	20	/	2015

**Transaction ID : SB23.6162**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6000.00
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18000.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 22 OF 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Bill Morrison for City Council**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	18	/	2015

Mailing Address 119 S. Main Street

City	State	Zip Code
Memphis	TN	38103

**Transaction ID : SB29.6044**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

1000.00
---------

Candidate Name

**Bill Morrison**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. Cuomo 2018**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

Mailing Address PO Box 4105

City	State	Zip Code
New York	NY	10163

**Transaction ID : SB29.6066**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

2500.00
---------

Candidate Name

**Andrew Cuomo**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY

District:

Full Name (Last, First, Middle Initial)

**C. Friends of Jim Strickland**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	14	/	2015

Mailing Address 22 N. Front St.  
Suite 660

City	State	Zip Code
Memphis	TN	38103

**Transaction ID : SB29.6035**Purpose of Disbursement  
Contribution

011

Amount of Each Disbursement this Period

2000.00
---------

Candidate Name

**Mr. Jim Strickland**Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Friends of Kemp Conrad**

Mailing Address 566 Melody Lane

City	State	Zip Code
Memphis	TN	38120

Purpose of Disbursement  
Contribution

011

Candidate Name

**Kemp Conrad**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2015

**Transaction ID : SB29.6060**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. Friends of Senator Mark Norris**

Mailing Address 22 Belcaro Circle

City	State	Zip Code
Nashville	TN	37215

Purpose of Disbursement  
Contribution

011

Candidate Name

**MARK NORRIS**Category/  
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: TN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		08		2015

**Transaction ID : SB29.6156**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Reid Hedgepeth for City Council**

Mailing Address 332 Wilkerson PLace

City	State	Zip Code
Memphis	TN	38111

Purpose of Disbursement  
Contribution

011

Candidate Name

**Reid Hedgepeth**Category/  
Type

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2015

**Transaction ID : SB29.6062**

Amount of Each Disbursement this Period

500.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 24 OF 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT**

Full Name (Last, First, Middle Initial)

**A. Retail Leaders Political Action Committee**Mailing Address 1700 N. Moore  
Suite 2250

City Arlington State VA Zip Code 22209

Purpose of Disbursement  
Contribution

011

Candidate Name

**Retail Leaders Political Action Committee**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	30	/	2015

**Transaction ID : SB29.6064**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Springer for Memphis**Mailing Address 1661 Aaron Brenner Dr.  
#300

City Memphis State TN Zip Code 38120

Purpose of Disbursement  
Contribution

011

Candidate Name

**Dan Springer**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2015

**Transaction ID : SB29.6048**

Amount of Each Disbursement this Period

250.00
--------

Full Name (Last, First, Middle Initial)

**C. Wharton for Mayor**

Mailing Address 2670 Union Ave

City Memphis State TN Zip Code 38112

Purpose of Disbursement  
Contribution

011

Candidate Name

**Mr. AC Wharton**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2015

**Transaction ID : SB29.6046**

Amount of Each Disbursement this Period

2500.00
---------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7750.00



	21b		22		23		24		25		26
	27		28a		28b		28c		X 29		30b

AUTOZONE INC COMMITTEE FOR BETTER GOVERNMENT

State:  District:

**B.**

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State:  District:

Date of Disbursement

**C.**

Amount of Each Disbursement this Period

Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State:  District:

Food Item	Number of people
Pizza	1200
Pasta	800
Sandwich	600
Salad	400
Soup	200

17750.00